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## BIB DATA SHEET

CONFIRMATION NO. 4845

<b>SERIAL NUMBER</b> 10/669,470	<b>FILING or 371(c) DATE</b> 09/25/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1621	<b>ATTORNEY DOCKET NO.</b> 1018995-000738		
<b>APPLICANTS</b> Gou Shinohara, Yokosuka-shi, JAPAN; Kin-Ya Tsuchiya, Yokosuka-shi, JAPAN; Katsuaki Yamanouchi, Yokosuka-shi, JAPAN; Toshiyuki Inui, Yokosuka-shi, JAPAN; <b>** CONTINUING DATA *****</b> This application is a CON of PCT/JP02/03187 03/29/2002 <b>** FOREIGN APPLICATIONS *****</b> JAPAN 2001-101821 03/30/2001 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/17/2003						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>Examiner's Signature</u>		<input checked="" type="checkbox"/> Met after Allowance FB Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404 UNITED STATES						
<b>TITLE</b> AGENT FOR IMPROVING BONE METABOLISM						
<b>FILING FEE RECEIVED</b> 1698	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees		
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